No 40

NO 5

Midwifery

A Dissertation
on
Amenorrhoea
By David Kirkpatrick
[redacted]
of Penn.

1818

David M. Kirkpatrick

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No embarrasment is more sensibly felt by the student of medicine than that called into exist-ence at the particular time when he is about to offer himself at the altar of medical science for adoption as one of its children; when he is about to undertake a task so arduous or assume a res-ponsibility so great as that connected with the practice of medicine.

When it is considered that the inexperience of the medical student must be a very perplexing obstacle to his first essay on a medical subject, and when it is well known that in making the attempt his object is of the first importance to himself and for the attainment of which he feels the utmost anxiety and solicitude; it is then no wonder that he ventures to pay his first tribute to science with diffidence, that he hesitates to usher his infantile production before a learned and venerable faculty.

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in which he has enlisted preponderates, and a fervent desire to become instrumental (even in the smallest degree) in meliorating the miseries of fallen human nature urges him to the dis=charge of an arduous task and reconciles his feelings to the awkward situation in which he appears as an author.

Under such impressions the following essay is most respectfully submitted.

"Et enim uterus pars principalis, quæ totum corpus facile in consensum trahit."

Amenorrhœa.

The menstrual action is liable to derangement and disease alike with other functions of the human system; and the importance of its healthy state in the female economy is at once recognized by the necessary and imme=diate inquiries which a judicious physician will always make with regard to the requ=

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=larity of this secretion, when called to the bed side of a female labouring under dis=ease. A correct knowledge of this kind is very essential in regulating our curative indications. Indeed so important is the healthy action of the uterus to the existence of a similar state throughout the system that we have been emphatically directed by a person who has contributed not a little to the improvement of medical science "never to lose sight of the catamenia in women".

In the nosological arrangement of Doctor Cullen amenorrhoea is placed in his class locales and in the order epischesis.

According to the strict etymology of the word this disease may be defined a privation or absence of the menstrual discharge. By authors it is divided into two kinds viz reten=tion and suppression of the menses. By the former is meant that species of Amenorrhoea

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in which the catamenial discharge has not yet made its appearance, that period of life having arived at which it usually occurs. By the latter is understood that state of the disease in which this flux after having been established and continued for some time becomes suppressed, unattended by pregnancy. In each kind obvious disease exists in the system either in the relation of cause or effect.

Retention of the menses

On account of the great inequality as to the age at which females begin to menstruate in different climates and also under different circumstances in the same climate it may be remarked that the non-appearance of the catamenia at a particular age is not to be considered as any evidence of the existence of this disease. It is only when to this circumstance there are superadded certain morbid symptoms that we are to infer the presence of this

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species of amenorrhœa.

This disease is supposed by some to be owing to general debility or want of vigour in the system. It is no doubt not unfrequently referable to malformation of the organs of generation or deficiency or disease of the ovaria.

The symptoms attendant on retention of the menses are a sense of debility, lassitude, sluggishness, a dislike to motion, fatigue on the least exercise, dyspepsia, a leucophlegmatic countenance, depravity of appetite evinced by a great desire for chalk, cinders, &c. costiveness, flatulency and acidity in the stomach and bowels, dyspnœa, palpitation of the heart, œdematous swelling of the feet, a pale and flaccid state of the whole body, together with pains in the back, hips and loins. The pulse is small and quick. As the disease advances a livid circle is said to surround the eye and the face assumes a yellowish hue. This constitutes what has been called

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chlorosis. Notwithstanding the fact that in general this disease is attended with symptoms of debility, yet I believe that it sometimes occurs accompanied with indications of fulness and plethora evinced by flushings of the countenance, pains in the head and breast.

This circumstance is evidently of some importance in its practical application to the treatment of this form of Amenorrhœa.

When from the symptoms just enumerated we ascertain the existence of any inordinate degree of excitement, our remedies are particularly obvious. Bloodletting in proportion to the urgency of the case must be resorted to. Next to this purgative medicines demand our attention as well to obviate constipation of the bowels as to produce depletion. Perhaps the latter remedy if used to a sufficient extent might frequently supersede the necessity of bloodletting in the present instance.

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If however symptoms of debility are present (and such is generally the case) a mode of treatment the reverse of that which has just been mentioned must be pursued. Having premised an emetic and cathartic if necessary for the evacuation of the stomach and bowels and by which these organs are rendered more susceptible of the impression of subsequent remedies; it is proper to exhibit tonic medicines of the mineral as well as of the vegetable kind. Of the former the preparations of iron have been administered, the preference being in most cases given to the carbonate or rust of that metal. Chalybeate preparations and the muriated tincture of iron have been recommended as particularly beneficial. The peruvian bark and other vegetable bitters may be used. A nourishing diet of easy digestion is proper and also exercise should be taken daily in

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such manner as to avoid fatigue. Diverting pursuits and agreeable company have been recommended as productive of advantage in this disease. The daily use of the hot salt water bath is advised by Mr Burns in preference to the cold bath in chlorosis, the latter being in his opinion injurious. Frictions with warm flannel should succeed the use of the warm bath.

A practitioner of no slender reputation or merit in medicine viz Doctor Hamilton of Edinburgh has very strongly recommended the use of purgatives alone in retention of the menses or chlorosis under the impression that this disease is to be refered to a deranged state of the primæ viæ. In order to obtain the greatest benefit from them or be successfull in their use he advises the purgative mode of treatment to be assiduously employed for a considerable length of time. The seldom occurrence of this

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disease and the want of experience that grand criterion of correct practice renders me unable to bear any testimony either for or against the practice. However, without being obliged to adopt the pathology of Doct. Hamilton as correct or to place implicit confidence in it as explaining in a satisfactory manner the cause of this form of Amenorrhoea I think we may very readily conceive of the propriety of using cathartic medicines in this or any other disease attended with a constipated or torpid state of the intestinal canal. But it is highly probable that the modus operandi of this class of medicines is not confined merely to the evacuation of the contents of the tube through which they pass. They exert a stimulant action and some of them have that action directed to a particular part of the intestinal tube. Hence we may easily imagine that a stimulant operation produced on the intestinal canal can

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be communicated by sympathy to the uterus and excite that viscus to healthy action and hence the propriety of selecting such cathartics as operate on the rectum. Aloes

Marriage has been proposed as a remedy in this disease and I believe it has been successfull.

Suppression of the menses.

This species of amenorrhoea has already been defined. By some writers it has been supposed to be a symptomatic or secondary disease, and Mr Burns has attributed it very generally to such diseases as tend greatly to weaken the patient. It may be produced by causes which operate during the flow of the menses, such as cold and passions of the mind. I have known a very obstinate case of this disease from the conjoint operation of both these causes.

Suppression like retention of the menses appears under two different states of the system and hence might not improperly be divided into acute

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and chronic or rather as it occurs accompanied with symptoms of inflamatory action or with those of debility. The former state is marked by a frequent, hard pulse, flushings of the face, hot skin, pain in the head back and loins, accompanied with costiveness, and dyspepsia. Plethora is here very evident and vicarious hemorrhages from different parts not unfrequently take place. {great Arteries

In this state of the system it is essentially necessary to call in the aid of depleting remedies. Bloodletting is here adviseable and its extent must be regulated by the circumstances of the case. Purgatives are also to be used. The semicupium might be conjoined with the latter remedy particularly if the system is making some effort for the restoration of the menstrual discharge.

When however this state assumes a chronic form or when the disease occurs in persons of a lax

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and debilitated habit, symptoms somewhat similar to those of retention of the menses are observed to take place. The treatment here must commence with an emetic and the case subsequently is to be managed by tonics. Cathartic medicines are also indicated and should not be neglected.

In all forms of Amenorrhoea Doctor Chapman thinks he has found purgatives useful and he prefers a combination of aloes and calomel in these cases.

I have witnessed in suppression of the menses attended with considerable debility the happiest result from the use of the carbonate of iron continued for some time in conjunction with the daily use of the cold salt water bath, together with frequent exercise on horseback. The warm bath was resorted to at each monthly period particularly when there was any menstrual effort in the system. It was contin=

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=ued for an hour at each time. - Here electri=
=city has been recommended. It is to be
passed through the region of the uterus.
Blisters applied to contiguous parts have al=
=so been advised as exceedingly usefull.
It is frequently deemed necessary in the tre=
=atment of Amenorrhoea to call in the aid
of those medicines called emenagogues. Most
writers on the materia medica have consider=
=ed these as very uncertain remedies. Various
articles under this head have been used at diff=
=erent times, but as the limits of this paper pre=
=clude anything very minute on this subject
I shall only mention some of those substances
which have been supposed beneficial in amen=
=orrhoea.

To Doctor Hartshorne has been ascribed the
introduction of the Polygala senega in the
treatment of this disease. But to one of our
worthy medical teachers has justly been attri=

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=buted the credit of testing its virtues and ush=
=ering it into general practice. Doct Chapman
has communicated in the second volume of the
"Eclectic repertory" information of primary im=
=portance on this interesting article. By him
the decoction of the polygala is the preparati=
=on which is exhibited and is made by pour=
=ing a pint of boiling water on an ounce of
the bruised root and simmering it untill re=
=duced to one third. Of this, four ounces are
to be given during the day. But when the sys=
=tem is making an effort for her own relief, the
senega is to be pushed as far as the stomach
will bear. Doctor Chapman has here given two
ounces every hour. A suspension of the medi=
=cine is directed during the intervals of
the menstrual period for a week or two as
its constant use would produce nausea and
disgust. The addition of an aromatic in pre=
=paring the decoction renders it more palata=

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-ble. We are further directed in the use of this article to pay attention to the general system obviating excessive excitement or debility by suitable remedies.

From a slender experience of cases in which the polygala senega has been used I am prepared to express a great deal of confidence in this remedy, in the treatment of Amenorrhoea. And from what has been executed by this medicine in the hands of others I am induced to anticipate favourable results from its use.

The ergot, savin, madder, black hellebore and phosphorus have been severally used and from the good authority on which they come recommended, there can be no doubt but that they may furnish important resources to the practitioner in the treatment of diseased menstruation. I have lately been assured of a case successfully treated by the tincture of cantharides alone. Although the remedies now detailed are such, as

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as are generally used with advantage in Am=enorrhoea; yet it unfortunately occurs that we must be prepared to meet with occasional disapp=ointment and in some cases to be foiled in every attempt to overcome the disease by our whole rou=tine of medicines. Whether this can be attribu=ted to our limited or incorrect knowledge of the cause of the disease I am entirely unable to say. However I am much inclined to believe that a=menorrhoea has too often been considered as a symptomatic or secondary affection. As general debility is so frequently present in this case, it has been refered to that as the fount=ain from whence it flows, as the main spring which excites it into action. That this disease may sometimes be produced or influenced by pre=vious or existing disease of the system, cannot I think be questioned; but I am of opinion that this is much more frequently than is imagined an idiopathic affection, to which as a cause may

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be refered all the concomitant disease of the system.
We are informed that from the dissection of those who have died affected with retention or suppression of the menses the ovaria have been uniformly found in a diseased state. From this circumstance joined to the fact that the removal of these bodies has put a complete stop to the menstrual secretion (of which a well attested instance may be found in the chirurgical works of the celebrated Mr Pott) may we not justly infer that these organs act some important part in the process of menstruation, and that our pathological views have not hitherto been sufficiently extensive.
The ingenious and learned Doctor Cullen was aware of the important connexion existing between the ovaria and menstrual process, when he gave it as his opinion that retention of the menses was referable to a certain state of the ovaries. I am further induced to believe that Amenorrhoea is mostly a primary disease on

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the authority of the late venerable Doctor Rush who declared that the menses when retained gave origin to a major part of the diseases of females whether of the acute or chronic kind. He considered suppression of the catamenia as productive of diseases of a highly inflamatory nature. This opinion was founded on the broad base of extensive experience; and such was the language of a man whose hoary locks bespoke a life long versed in the practice of his profession; whose arm had often been extended to rescue the lovely female from the ravages of disease and snatch her from the dreadful grasp of death, and whose precepts on this point should command the greatest respect.

No less favourable to my ideas of the idiopathic nature of this disease is the expression of one of our medical teachers "that there is not a disease which afflicts females which is not aggravated by amenorrhoea; not to say more." If fever may at any time be considered as primarily loca=

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=ted in the stomach; if this be allowed as the centre of the disease and the point from which it extends throughout the system, producing symptoms so malignant and various, symp=toms which cannot be accounted for except on the doctrine of sympathy: may we not then be permitted to consider that in amenorrhoea the ovaria by the exertion of some peculiar con=nexion with the uterus are the primary and efficient link in the chain of disease attendant on a morbid state of the catamenia? Are we not induced to believe that here the disease sits enthro=ned in hideous majesty, that this is the centre of morbid action, this, the spot from which the diseased impressions radiate?

It is even a matter of some doubt whether amen=orrhoea is not occasionally a cause of mania in females evincing here its primary nature. To this opinion I am led by the important paper to which I have already refered. Indeed so strong and forcible is the language of Doctor

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Chapman on that subject that I am in=
=duced to quote his own words. After de=
=tailing some cases he goes on to say that
"If they do not conclusively evince that Am=
=enorrhoea is sometimes a cause of insan=
=ity, they at least are calculated to awa=
=ken our suspicions upon the subject. Nor
is this all. They show distinctly the relation
between the two diseases and demonstrate
in the most striking manner how essential
it is in treating the affections of the mind
to have a constant and vigilant eye direc=
=ted to the uterine function. They prove in short
incontestibly that in some cases of mania in
women a cure may be effected when other means
have totally failed by simply producing an
effusion of the menses."
Even phthisis pulmonalis, that gigantic and for=
=midable disease which carries terror with
its name has been considered by Doctor Shea=
=rman in a paper inserted in the "Eclectic

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repertory as an effect arising in some cases from amenorrhoea as a cause particularly in those predisposed to pulmonary complaints. He states that no occurrence is more common than cough, pain in the side and difficulty of breathing immediately after obstruction of the menses takes place, these symptoms going off upon the return of that discharge.

If we ask why this does not take place uniformly? we are immediately met by the answer "that when the affection of the lungs has proceeded to a certain extent it will go on independently of its cause, and is no longer to be removed by the restoration of the suppressed evacuation."

Indeed I think when we take into view the particular determination of blood to the lungs in obstruction of the catamenia; producing vicarious hemorrhages from those delicate organs, I think that the opinion

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advanced by Doctor Shearman is not only plausible, but correct.

Are we at a loss to account for these facts when it is well known that a diseased joint is sufficient to excite hectic fever and produce a train of symptoms the most distressing as well as dangerous; when we know that by sympathy or consent of parts, the human system is liable to general disease from local morbid impressions.

Upon the whole I think that it may be fairly concluded that Amenorrhoea is very frequently an idiopathic affection disseminating disease throughout the system by the medium of sympathy.

Hence the very just and appropriate remark of a medical professor whose name has more than once been mentioned in the preceding part of this essay; a remark truly worthy of its author and one which

deserves to be held in perpetual recollection viz? "That next to the stomach the uterus exerts the widest range of influence on the system."